

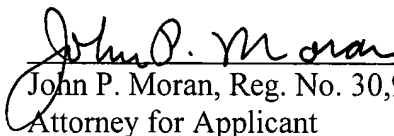
Remarks

Claims 1-17, 19, 20, and 22-32 are now pending in this application. Applicant has canceled claims 18 and 21.

The undersigned hereby authorizes the Commissioner to charge any insufficient fees or credit any overpayment associated with this communication to Deposit Account No. 19-5127, 18180.0231.

Respectfully submitted,

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